



**CALIFORNIA ARMY NATIONAL GUARD
ARMY DIVISION MEDICAL LIAISON (WTU)
TOUR ANNOUNCEMENT**



OPEN TO ALL CALIFORNIA ARMY NATIONAL GUARD

THIS TOUR IS FULL TIME NATIONAL GUARD (FTNGDOS) - TITLE 32

- 1. POSITION AVAILABLE:** ARMY DIVISION MEDICAL LIAISON (WTU)
- 2. TOUR LOCATION:** SACRAMENTO, CA
- 3. EFFECTIVE DATE:** 4 February 2010
- 4. CLOSING DATE:** 4 March 2010
- 5. TOUR LENGTH:** ****Minimum 12 month tour length (FY)**
- 6. MINIMUM GRADE: E-5(P)* MAXIMUM GRADE: E-7**
*****Must provide verification of WLC phases for promotion eligibility.**
- 7. MOS / AFSC:** N/A
- 8. PERSONNEL ELIGIBLE TO APPLY:** (X) Male (X) Female () OFF () WO (X) ENL
 - a. All members of the California Army National Guard
- 9. SELECTING SUPERVISOR:** Army Division Commander/Army Division CSM
- 10. MILITARY STATUS:** FTNGDOS, Title 32 USC
- 11.** This position is a Full Time National Guard (FTNGDOS) Tour. Tour will be subject to the availability of funds from fiscal year to fiscal year.
- 12. APPLICANT MUST,** at a minimum, submit documents referenced in **attachments A and B** to this announcement and meet all applicable criteria below:
 - a. Applicants must possess a favorable Entrance National Agency Check/National Agency Check (ENTNAC/NAC) within the past 10 years.
 - b. Applicants will be screened in a manner that provides reasonable certainty that the member is of good character, well motivated and an appropriate representative of the National Guard in duties subject to high profile scrutiny by National Guard senior commanders.
- 13. Unique Requirements and conditions of Active Duty tours:**
 - a. Urinalysis testing upon entry to active duty in addition to periodic testing during active duty. These requirements are in addition to testing by units of assignment during IDT/IAD under Substance Abuse Testing. Favorable drug screening test prior to initial entry is mandatory.
 - b. Requirement to continue attendance at IDT/IAD and Annual Training while on FTNGDOS.

c. Standards of Conduct:

- 1) National Guard members participating in this program are required to comply with state laws and with DoD 5500.7-R. They are required to uphold the highest standards of conduct and personal appearance.
- 2) Outside employment, associations and off duty conduct/activities must be consistent with federal directives on ethics and with state and federal conflict of interest policies. Outside employment will require written approval from the Army Division Commander in accordance with NGR 500-2/ANGI 10-801, dated 29 August 2008, Chapter 8, paragraph 8-25.

14. Tour Description

Selectee will be responsible for the maintaining communications and care of CA ARNG Warrior Transition Unit Soldiers throughout the United States. Duties include, but are not limited to, checking and verifying WTU Soldiers medical status, frequent site visits, coordination with Active Duty personnel, update State Leaders on quarterly basis regarding WTU Soldiers status, coordinate communications with Soldier/Family and home units and other Soldier care issues as needed.

This tour will require frequent temporary duty (TDY) and transportation by government, military or commercial aircraft for participation in and /or attendance at duty related conferences/seminars/site visits, as well as official visits to units, headquarters, and agencies. Knowledge of Army, National Guard, and other operations, management, programs, and directives is mandatory.

15. Qualifications

Minimum Qualifications:

- a. Must be available for frequent travel, as well as providing accurate trip reports.
- b. Ability to track and communicate with Soldiers assigned to WTUs throughout the United States.
- c. Excellent verbal and written communication skills.
- d. Computer literacy, including skills with Microsoft Word, Excel and Outlook.

Preferred Qualifications:

- a. Skilled in solving complex Soldier care issues and communicating them to the lowest levels of command.
- b. Be able to track and report ALL issues related to WTU Soldiers and their Families.
- c. Preferred successful deployment history.
- d. Knowledge or experience with medical/psychiatric counseling.

16. Applications must be received in the Army Division Office by mail or in person no later than 1700hrs on the closing date. Late applications will not be considered. Applications will not be accepted in binders or document protectors.

17. SUBMIT COMPLETE APPLICATION by the closing date to:

Joint Force Headquarters, Army Division
ATTN: CAAD, Box # 9, SFC Hubbard, James D.
9800 Goethe Road
Sacramento, CA 95827-9101

18. Questions may be directed to the Army Division NCOIC at (916) 854-3325

19. Equal Opportunity: The California National Guard is an Equal Opportunity Employer. Selection for this position will be made without regard to race, religion, age, national origin, sex, political affiliation, marital status, or any other non-merit factor.

Attachment A

The following are required documents to be turned in with your application:

1. Form 1058, Application for Full Time National Guard Duty (FTNGDOS)
2. The attached letter of recommendation (Attachment B) from first O-5 Commander or their designee, signed within 60 days of the tour effective date, acknowledging all statements and information within the letter to be true and accurate.
3. Military Biographical Summary and Resume
4. Retirement Points Accounting Statement (RPAS) / AF Form 526 – Points Summary Credit updated within 60 days of the tour effective date.
5. All previous DD Forms 214 (Copy must include bottom portion of RE Code).
6. Medical:
 - a) Army: Printout of Individual Medical Readiness (IMR) report. Found under AKO, My Medical Readiness. Select IMR Record. **** Report must have been generated within 60 days prior to tour effective date.**
<https://apps.mods.army.mil/MEDPROS/MyMedicalReadiness/default.aspx>
 - b) To ensure compliance of the chapter 3 medical retention standards of the FTNGDOS program, the Soldier's MEDPROS IMR report must be reviewed by the Soldier's parent unit to ensure that Chapter 3 medical requirements are met prior to submitting the application packet. If these standards are not met, the unit must provide all original medical documents to their respective State medical detachment personnel to update MEDPROS.
7. Copy of five year driving record from the California Department of Motor Vehicles within 60 days prior to tour effective date. <http://dmv.ca.gov/fors/inf/inf11125.pdf>
8. Copy of a current Army Physical Fitness Test (DA Form 705) and/or ANG Fitness Test.

Attachment B

Unit Letterhead

Date _____

MEMORANDUM FOR Commander, California Army National Guard, ATTN: SFC Hubbard, James D., 9800 Goethe Road, Sacramento, CA 95827

SUBJECT: Letter of Recommendation for _____
Last Name, First, Middle Initial, Last 4 of SSN

1. The above named Soldier is an active drilling member of _____ and has been for _____ years. I recommend this individual be considered for a position with the California Army National Guard.
2. I acknowledge that the following statements and information are true and accurate prior to placement on Active orders:
 - a. He/She upholds the highest standards of conduct, personal appearance, and does not currently have any adverse or flagging actions.
 - b. This Servicemember is in compliance with AR 600-9/AFI 10-248, Weight and Body Fat Management Program.
 - c. This Servicemember has passed a current physical fitness test with a passing score.
 - d. This Servicemember and unit of assignment are fully aware of the requirement to continue attendance at IDT/IAD or AT while on FTNGDOS.
 - e. This Servicemember has met physical qualifications in accordance with AR 40-501, Standards of Medical Fitness and Supplement 2, Medical Examinations & Standards prior to FTNGDOS start date. Prior to entry onto FTNGD-DOS, applicants must be medically certified, drug free, be tested negative for Human Immunodeficiency Virus (HIV) within 2 years of application date.
 - f. This Servicemember is in a "DEPLOYABLE" status. The member does not have any medical flags, or temporary or permanent profiles that would prevent successful completion of a retention/periodic physical.
 - g. I am aware that the Servicemember will be serving as the Army Division Medical Liaison (WTU) only upon receiving my recommendation and endorsement. I am aware that at any time, if the Servicemember fails to maintain the above requirements, I may withdraw my recommendation for employment with Army Division.
3. The point of contact for this memorandum is the undersigned. I may be reached at _____.
Phone Number

Minimum first O-5 Commander in Chain of Command
SIGNATURE
BLOCK